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CONFIRMATION NO. 2230

|                                    |   |                     |                               |   |
|------------------------------------|---|---------------------|-------------------------------|---|
| <b>SERIAL NUMBER</b><br>09/931,268 | <b>FILING OR 371(c) DATE</b><br>08/16/2001<br><b>RULE</b> | <b>CLASS</b><br>205 | <b>GROUP ART UNIT</b><br>1753 | <b>ATTORNEY DOCKET NO.</b><br>291958183US |
|------------------------------------|---|---------------------|-------------------------------|---|

## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *Cn*

This application is a CIP of 09/387,084 08/31/1999 PAT 6,365,033  
which is a CON of PCT/US99/09659 05/03/1999  
which claims benefit of 60/083,882 05/01/1998

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *have*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/12/2001

|  |                        |                     |                    |                         |
|--|------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR COUNTRY<br>TX | SHEETS DRAWING<br>4 | TOTAL CLAIMS<br>22 | INDEPENDENT CLAIMS<br>5 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance |                        |                     |                    |                         |
| Verified and Acknowledged <i>Alb. Kooperski</i><br>Examiner's Signature  | Initials               |                     |                    |                         |

## ADDRESS

25096

## TITLE

Automated chemical management system executing improved electrolyte analysis method

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|------------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>1074 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit _____ |
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